



Testimony of Whitney A. Parrish

LD 1722 - Ought To Pass as Amended

An Act To Ensure Access to All Paths to Recovery for Persons Affected by Opioids Using Money Obtained through Litigation against Opioid Manufacturers

Joint Standing Committee on Health and Human Services

May 21, 2021

Senator Claxton, Representative Meyer, and Distinguished Members of the Joint Standing Committee on Health and Human Services:

My name is Whitney Parrish, and I am the Policy and Advocacy Director for Health Equity Alliance (HEAL). Health Equity Alliance is a nonpartisan, nonprofit public health and harm reduction organization that envisions and works toward a world where health justice is realized for all Mainers. I am here today speaking in support of LD 1722.

As you know, funds derived from settlement of or damages granted in these lawsuits related to opioid manufacturers are coming to Maine as the direct result of harm caused by opioid and other chaotic or problematic drug use in our communities. We believe it is critical for these funds to remain in our harmed communities—which span the entirety of the state of Maine—and should be managed and directed, to the extent possible, by individuals most directly impacted and those who have expertise in that harm caused and how to reduce it. We believe LD 1722 will accomplish these objectives.

While we support the entirety of LD 1722, we believe there are a few key elements of the bill to highlight.

- 1) **Section 4, subsection A:** *The fund shall establish and ensure access to all USDA-approved medications for opioid or substance use disorder* (paraphrase), thus working to ensure individual needs are met instead of assuming what people need for their medical care when engaging medicine for opioid use disorder (MOUD), or medication-assisted treatment (MAT). It also does not assume that all people who use drugs problematically use



opioids. Maine data show us that heroin use is decreasing and methamphetamine use is rising. Alcohol remains a constant.;

- 2) **Section 4, subsection H:** *Establishing or expanding treatment alternatives that provide psychosocial supports and medication-assisted treatment to expand access to care in rural areas including mobile health services, telehealth, and pharmacist administration of medication.* As a rural provider, we cannot underscore enough the absolute necessity for agility and innovation in how we deliver services. We need to think beyond brick and mortar establishments and truly meet people where they are at.
- 3) **Section 5 (all):** *Prioritization of medication and services to individuals lacking insurance and financial means and individuals returning to their communities from carceral settings.* Section 5 describes some of Maine's most vulnerable residents, especially in terms of overdose death vulnerability. This prioritization is not only important in terms of access to recovery resources, but making sure people stay alive to choose that path in the first place.

We believe one of the most important parts of this bill is the establishment and composition of the Maine Opioid and Substance Use Abatement Advisory Commission, which is proposed to be represented by individuals most knowledgeable about how to achieve our goals of creating all pathways to recovery and reducing harm that can be caused by illicit substances.

To that end, we fully support the proposed amendment of including a seat dedicated to Harm Reduction. Harm Reduction is the only field or modality in the state working directly with Mainers who actively use drugs, without expectation or requirement. Our services often serve as a portal to higher or different levels of care, and we work to build lasting, trusted relationships with individuals as they make deeply personal health decisions, which includes the decision to engage treatment. Additionally, the reality is that unfortunately, we will never stop harm completely. It is our responsibility to reduce harm to the extent possible in all situations and remain pragmatic and realistic in our approaches, and we believe having this voice at the table is essential.

Likewise, we strongly support geographic and racial representation on the proposed commission. The harm caused by chaotic drug use spans the entire state, but some regions have been hit particularly hard due to economic depression from loss of industry, lack of health care and accessible services, and other circumstances. Racial representation is also of utmost importance to reflect disproportionate harm



in criminal legal contact connected to drug use involvement and work to ensure equity in our governmental processes.

We believe LD 1722 sets up an important process to address a pressing issue. I want to thank Representative Warren for her unrelenting advocacy, care, and love as a champion for some of Maine's most vulnerable residents affected by chaotic drug use and the overdose death crisis. We strongly urge the committee to continue to be the health champions you are and vote '*Ought to Pass as Amended*' on LD 1722.